



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Re-Elect Brandon Todd 2020	2. OCF Identification Number PCCCC4207099
Address 1312 Iris Street, NW	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20012	

4. TYPE OF REPORT: **March 10th Report**

This REPORT contains activity for: **Primary Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 2/1/2020 through 3/10/2020		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 366,863.11	
(c) Total Receipts [from Line (16)]	\$ 31,435.00	\$ 453,110.99
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 398,298.11	
7. Total Expenditures (from Line 22)	\$ 57,376.68	\$ 112,715.02
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 340,921.43	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

Mr. Adam Hunter

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

03/10/2020

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND EXPENDITURES
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Re-Elect Brandon Todd 2020	REPORT COVERING THE PERIOD FROM: 2/1/2020 TO: 3/10/2020	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 31,435.00	\$ 452,610.99 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 500.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 31,435.00	\$ 453,110.99 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 31,435.00	\$ 453,110.99 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 56,876.68	\$ 104,465.02 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 500.00	\$ 3,700.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 500.00	\$ 3,700.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 4,550.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 4,550.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 57,376.68	\$ 112,715.02 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	366,863.11
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	31,435.00
25. SUBTOTAL (add Lines 23 and 24)	\$	398,298.11
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	57,376.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	340,921.43

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

1. Full Name, Mailing Address and Zip Code Joseph Forcier II 5857 Nebraska Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/03/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer TD International 1825 K St NW, Washington, DC 20006		
Aggregate Year-To-date		\$ 100.00	
2. Full Name, Mailing Address and Zip Code Todd Monash 4520 River Rd NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/03/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Banker Name and Address of Employer United Bank 4900 Massachusetts Ave NW, Washington, DC 20016		
Aggregate Year-To-date		\$ 250.00	
3. Full Name, Mailing Address and Zip Code Greg Nicklas 6525 S Highway A1A, Melbourne Beach, FL 32951	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/08/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 6525 S Highway A1A, Melbourne Beach, FL 32951		
Aggregate Year-To-date		\$ 250.00	
4. Full Name, Mailing Address and Zip Code Andrew Rakestraw 411 Buchanan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government 825 N Capitol St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 50.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

5. Full Name, Mailing Address and Zip Code Michael Cohen 248 Quackenbos St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/09/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation President Name and Address of Employer Suitless Inc 248 QUACKENBOS ST NW, WASHINGTON, DC 20011-1445		
Aggregate Year-To-date		\$ 250.00	
6. Full Name, Mailing Address and Zip Code Michael Dupigny 602 Rittenhouse St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/09/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 602 Rittenhouse St NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 50.00	
7. Full Name, Mailing Address and Zip Code Nigel Scott 7306 Georgia Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/09/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Self Name and Address of Employer Attorney 7306 Georgia Ave NW, Washington, DC 20012		
Aggregate Year-To-date		\$ 100.00	
8. Full Name, Mailing Address and Zip Code David Selman 1331 Gallatin St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/09/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation DC Government Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 50.00	
9. Full Name, Mailing Address and Zip Code Jennifer Wilson 5018 7th Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/09/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Unemployed Name and Address of Employer Unemployed 5018 7th Pl NW, Washington, DC 20011		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 20.00
10. Full Name, Mailing Address and Zip Code Damon Byrd 9300 Wellington St, Lanham, MD 20706		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/10/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation DC Government Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
		Aggregate Year-To-date		
11. Full Name, Mailing Address and Zip Code Amanda Choutka 526 Sheridan St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/11/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Morelands Tavern Name and Address of Employer Server 5501 14th St NW, Washington, DC 20011		
		Aggregate Year-To-date		
12. Full Name, Mailing Address and Zip Code Blaine King 1650 Harvard St NW, Washington, DC 20009		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/11/2020 Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual		Occupation Homestead Restaurant Name and Address of Employer Owner 3911 Georgia Ave NW, Washington, DC 20011		
		Aggregate Year-To-date		
13. Full Name, Mailing Address and Zip Code Ross Kone 227 Florida Ave NW, Washington, DC 20001		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/11/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Shenanigans Name and Address of Employer Bartender 227 Florida Ave NW, Washington, DC 20001		
		Aggregate Year-To-date		
14. Full Name, Mailing Address and Zip Code Alexander Makris 5109 4th St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/11/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation The Blaguard Name and Address of Employer Bartender 2003 18th St NW, Washington, DC 20009		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 50.00
15. Full Name, Mailing Address and Zip Code Valerie Torres 2702 Wisconsin Ave NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/11/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation Bartender Name and Address of Employer Mick Riverside Grill 3050 K St NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 45.00
16. Full Name, Mailing Address and Zip Code Shawn Townsend 400 Galloway St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/11/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Director Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 150.00
17. Full Name, Mailing Address and Zip Code Stephanie Johnson 4950 Call Pl SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/14/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Individual	Occupation Lawyer/Professor Name and Address of Employer Self/Howard University School of Law 2900 Van Ness St NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 150.00
18. Full Name, Mailing Address and Zip Code Claudette Baylor-Fleming 1807 Lawrence St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/16/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 1807 Lawrence St NE, Washington, DC 20018			
		Aggregate Year-To-date		\$ 25.00
19. Full Name, Mailing Address and Zip Code Philip De Vellis 4209 3rd St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/17/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Beacon Media 4209 3rd St NW, Washington, DC 20011			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 100.00
20. Full Name, Mailing Address and Zip Code Deborah Veney 6201 14th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/17/2020	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Public Relations Name and Address of Employer NewSchools Venture Fund 1616 Franklin Street, Oakland, CA 94612			
		Aggregate Year-To-date		\$ 450.00
21. Full Name, Mailing Address and Zip Code Temi Bennett 129 Adams St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/18/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Consumer Health Foundation 1200 U St NW, Washington, DC 20009			
		Aggregate Year-To-date		\$ 50.00
22. Full Name, Mailing Address and Zip Code Arrington Dixon 2401 Shannon Pl SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/21/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Businessman Name and Address of Employer ADA Inc. 2401 Shannon Pl SE, Washington, DC 20020			
		Aggregate Year-To-date		\$ 250.00
23. Full Name, Mailing Address and Zip Code Lauren Castaldi 4922 7th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/22/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government 825 N Capitol St NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 50.00
24. Full Name, Mailing Address and Zip Code Mike Nnawuchi 8314 Fenton St, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/22/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Individual	Occupation MBI Name and Address of Employer Manager 8314 Fenton St, Silver Spring, MD 20910			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 150.00
25. Full Name, Mailing Address and Zip Code Kim Alfonso 1809 Parkside Dr NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/23/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Results One Name and Address of Employer CEO 1809 Parkside Dr NW, Washington, DC 20012		
		Aggregate Year-To-date		\$ 350.00
26. Full Name, Mailing Address and Zip Code Kim Alfonso 1809 Parkside Dr NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/23/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Results One Name and Address of Employer CEO 1809 Parkside Dr NW, Washington, DC 20012		
		Aggregate Year-To-date		\$ 350.00
27. Full Name, Mailing Address and Zip Code Kimberley Alfonso 1809 Parkside Dr NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/23/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation CEO Name and Address of Employer Results one llc 1809 Parkside Dr NW, Washington, DC 20012		
		Aggregate Year-To-date		\$ 200.00
28. Full Name, Mailing Address and Zip Code Kimberley Alfonso 1809 Parkside Dr NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/23/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation CEO Name and Address of Employer Results one llc 1809 Parkside Dr NW, Washington, DC 20012		
		Aggregate Year-To-date		\$ 200.00
29. Full Name, Mailing Address and Zip Code Michelle Cross 4712 17th St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 02/23/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Self Name and Address of Employer Attorney 4712 17th St NW, Washington, DC 20011		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 50.00
30. Full Name, Mailing Address and Zip Code Aeva Doomed 7315 13th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/23/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Physician Name and Address of Employer Self 7315 13th St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 50.00
31. Full Name, Mailing Address and Zip Code Lisa Fauntroy 7601 Morningside Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/23/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Discovery Communications Name and Address of Employer Attorney 8403 Colesville Rd, Silver Spring, MD 20910			
		Aggregate Year-To-date		\$ 50.00
32. Full Name, Mailing Address and Zip Code Ethel Delaney Lee 3050 Military Rd NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/25/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 150.00
33. Full Name, Mailing Address and Zip Code Ethel Delaney Lee 3050 Military Rd NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 02/25/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 150.00
34. Full Name, Mailing Address and Zip Code David Abney 421 Gallatin St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation customer service representative Name and Address of Employer Exela enterprises 401 9th St NW, Washington, DC 20004			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 50.00
35. Full Name, Mailing Address and Zip Code john Babcock 5621 Utah Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5621 Utah Ave NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 100.00
36. Full Name, Mailing Address and Zip Code lastarza Hunt 55 Tuckerman St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 55 Tuckerman St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 100.00
37. Full Name, Mailing Address and Zip Code Michael Jelen 3102 Rittenhouse St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/01/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Engineer Name and Address of Employer AECOM 3102 Rittenhouse St NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 104.00
38. Full Name, Mailing Address and Zip Code Pedro Alfonso 1809 Parkside Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation CEO Name and Address of Employer Dynamic Concepts Inc 1730 17th St NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 250.00
39. Full Name, Mailing Address and Zip Code Virginia Ali 8345 E Beach Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 200.00
40. Full Name, Mailing Address and Zip Code Isidoro Amaya 5320 Illinois Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00	
	Contributor Type Individual Occupation Las Placitas Restaurant Name and Address of Employer Owner 5320 Illinois Ave NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 250.00
41. Full Name, Mailing Address and Zip Code Billie Jean Armstrong 3823 New Hampshire Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
	Contributor Type Individual Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 50.00
42. Full Name, Mailing Address and Zip Code Frank Austin 7201 7th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 44.00	
	Contributor Type Individual Occupation Progam Analyst Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 44.00
43. Full Name, Mailing Address and Zip Code Karlene Baddy 325 Whittier St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
	Contributor Type Individual Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 50.00
44. Full Name, Mailing Address and Zip Code Raymond Barn 4770 Dexter St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
	Contributor Type Individual Occupation Strategist Name and Address of Employer Self 4770 Dexter St NW, Washington, DC 20007			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 54.00
45. Full Name, Mailing Address and Zip Code Kim Barnette 1440 Primrose Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00	
Contributor Type Individual	Occupation Sr. Consultant Name and Address of Employer LMI 7940 Jones Branch Dr, Tysons, VA 22102			
		Aggregate Year-To-date		\$ 154.00
46. Full Name, Mailing Address and Zip Code Charles Baron 1328 Juniper St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self 1328 Juniper St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 100.00
47. Full Name, Mailing Address and Zip Code Yvonne Baskerville 1812 Allison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 75.00
48. Full Name, Mailing Address and Zip Code Leila Jackson Batties 1452 Primrose Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Holland & Knight LLP 800 17th St NW, Washington, DC 20006			
		Aggregate Year-To-date		\$ 350.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

49. Full Name, Mailing Address and Zip Code Brandon Baumgardner 3520 Commodore Joshua Barney Dr NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 5.00
Contributor Type Individual	Occupation DSP Name and Address of Employer RCM of Washington 64 New York Ave NE Ste 100, Washington, DC 20002		
Aggregate Year-To-date			\$ 5.00
50. Full Name, Mailing Address and Zip Code joseph belden 6902 5th st nw, washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 6902 5th st nw, washington, DC 20012		
Aggregate Year-To-date			\$ 50.00
51. Full Name, Mailing Address and Zip Code Lynette Benn 1323 Somerset Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
52. Full Name, Mailing Address and Zip Code Lisa Bess 4552 Argyle Ter NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Director Name and Address of Employer Self 4552 Argyle Ter NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 100.00
53. Full Name, Mailing Address and Zip Code Neil Bjorkman 116 Rittenhouse St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Legislative Affairs Name and Address of Employer USISPF 2550 M St NW, Washington, DC 20037		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 401.00
54. Full Name, Mailing Address and Zip Code Thomas Blanton 6167 Sligo Mill Rd NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 6167 Sligo Mill Rd NE, Washington, DC 20011			
		Aggregate Year-To-date		\$ 50.00
55. Full Name, Mailing Address and Zip Code Delores Bondurant 7923 14th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 100.00
56. Full Name, Mailing Address and Zip Code Jeanne Briscoe 831 Delafield Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Teacher Name and Address of Employer Woodlin Daycare 2103 Luzerne Ave, Silver Spring, MD 20910			
		Aggregate Year-To-date		\$ 54.00
57. Full Name, Mailing Address and Zip Code Barbara Brissett 3001 Veazey Ter NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 75.00
58. Full Name, Mailing Address and Zip Code Alison Brooks 5601 1st St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Accountant Name and Address of Employer Barbaricum 1714 N St NW, Washington, DC 20036			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 100.00
59. Full Name, Mailing Address and Zip Code Charisse Brossard 7714 13th St NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual		Occupation Program Analyst Name and Address of Employer ADP 1266 E Main St, Stamford, CT 06902		
		Aggregate Year-To-date		\$ 54.00
60. Full Name, Mailing Address and Zip Code Marilyn Brown 3050 Chestnut ST NW, Washington, DC 20015		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		
		Aggregate Year-To-date		\$ 154.00
61. Full Name, Mailing Address and Zip Code Laverne Brown 7552 Alaska Ave NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		
		Aggregate Year-To-date		\$ 50.00
62. Full Name, Mailing Address and Zip Code Jourdinia Smith Brown 7820 14th St NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		
		Aggregate Year-To-date		\$ 100.00
63. Full Name, Mailing Address and Zip Code Maiso Bryant 14824 Eastway Dr, Silver Spring, MD 20905		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

	Aggregate Year-To-date			\$ 100.00
64. Full Name, Mailing Address and Zip Code Janice Bryant 1421 Juniper St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
	Aggregate Year-To-date			\$ 50.00
65. Full Name, Mailing Address and Zip Code Basil Buchanan 1910 Kalorama Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
	Aggregate Year-To-date			\$ 100.00
66. Full Name, Mailing Address and Zip Code Marcy Buckley 1854 Woodmont Pl SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 44.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
	Aggregate Year-To-date			\$ 44.00
67. Full Name, Mailing Address and Zip Code Stacy Burnette 4208 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Director Name and Address of Employer Comcast 1590 Rhode Island Ave NW, Washington, DC 20005			
	Aggregate Year-To-date			\$ 500.00
68. Full Name, Mailing Address and Zip Code EC Coates 37 Gallatin St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 40.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 40.00
69. Full Name, Mailing Address and Zip Code Edward Cohen 2000 Tower Oaks Blvd, Rockville, MD 20852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd, Rockville, MD 20852			
		Aggregate Year-To-date		\$ 500.00
70. Full Name, Mailing Address and Zip Code Phillip Collins 5318 Colorado ave nw, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self 5318 Colorado Ave NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 54.00
71. Full Name, Mailing Address and Zip Code Jerome Arthur Contee 9039 Sligo Creek Pkwy, Silver Spring, MD 20901	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 100.00
72. Full Name, Mailing Address and Zip Code Lorraine Cooper 420 Nicholson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 400.00
73. Full Name, Mailing Address and Zip Code Ruby Corado 641 Gallatin st NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 104.00	
Contributor Type Individual	Occupation Executive Dir Name and Address of Employer Casa ruby 7530 Georgia Ave Nw, Washington, DC 20012			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 104.00
74. Full Name, Mailing Address and Zip Code Torine Creppy 11306 Marlboro Ridge Rd, Upper Marlboro, MD 20772		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual		Occupation President and CEO Name and Address of Employer Safe Kids Worldwide 1255 23rd St NW Ste 400, Washington, DC 20037		
		Aggregate Year-To-date		
75. Full Name, Mailing Address and Zip Code Bessie Crosson 5103 7th St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 14.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		
		Aggregate Year-To-date		
76. Full Name, Mailing Address and Zip Code Theresa Cusick 520 Whittier St NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Parker and Cusick, PLLC 520 Whittier St NW, Washington, DC 20012		
		Aggregate Year-To-date		
77. Full Name, Mailing Address and Zip Code Lisa Deane 623 Underwood St NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Program Manager Name and Address of Employer Federal Contractors, Inc 623 Underwood St NW, Washington, DC 20012		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

78. Full Name, Mailing Address and Zip Code Ted Diggs 311 Division Ave NE Apt 202, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Real Estate Investor Name and Address of Employer Entrepreneur 311 Division Ave NE Apt 202, Washington, DC 20019		
Aggregate Year-To-date		\$ 500.00	
79. Full Name, Mailing Address and Zip Code Enid Ann Doggett 2924 10th St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Inspr Media 3108 12th St NE, Washington, DC 20017		
Aggregate Year-To-date		\$ 154.00	
80. Full Name, Mailing Address and Zip Code Sheridan Easterling 1317 Iris St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 24.00
Contributor Type Individual	Occupation Juvenile Probation Officer Name and Address of Employer DC 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 24.00	
81. Full Name, Mailing Address and Zip Code Stanislaus Eban 7603 Georgia ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Health Name and Address of Employer Self Employed 7603 Georgia Ave NW, Washington, DC 20012		
Aggregate Year-To-date		\$ 154.00	
82. Full Name, Mailing Address and Zip Code Inga Erivin 3001 Veazey Ter NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Staffer Name and Address of Employer Federal Governmnet 825 N Capitol St NE, Washington, DC 20002		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 25.00
83. Full Name, Mailing Address and Zip Code Deborah Evans 5304 Chillum Pl NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00	
Contributor Type Individual	Occupation Program Analyst Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 154.00
84. Full Name, Mailing Address and Zip Code Antonio Evans 3031 W St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Program Analyst Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 25.00
85. Full Name, Mailing Address and Zip Code Raven Featherstone 2035 2nd St NW Apt G201, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2035 2nd St NW Apt G201, Washington, DC 20001			
		Aggregate Year-To-date		\$ 50.00
86. Full Name, Mailing Address and Zip Code Helen Felton 7535 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 25.00
87. Full Name, Mailing Address and Zip Code Michelle Fenty 4712 17th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Self Name and Address of Employer Self Employed 4712 17th St NW, Washington, DC 20011			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 100.00
88. Full Name, Mailing Address and Zip Code Jason Fink 2701 calvert st nw apt 509, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Individual	Occupation Politics Name and Address of Employer Dc gov 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 150.00
89. Full Name, Mailing Address and Zip Code Jason Fink 2701 Calvert st nw, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Individual	Occupation Politica Name and Address of Employer Dc gov 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 150.00
90. Full Name, Mailing Address and Zip Code Jacob Fuchs 513 12th St NE Apt 8, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 513 12th St NE Apt 8, Washington, DC 20002			
		Aggregate Year-To-date		\$ 200.00
91. Full Name, Mailing Address and Zip Code Charles Gaither 1422 Van Buren St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Self Name and Address of Employer Consultant 1422 Van Buren St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 500.00
92. Full Name, Mailing Address and Zip Code Darlene Gardner 8115 E Beach Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 8115 E Beach Dr NW, Washington, DC 20012			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

	Aggregate Year-To-date		\$ 25.00
93. Full Name, Mailing Address and Zip Code Jackson Gerst 1313 Buchanan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Manager Name and Address of Employer Mondee 1313 Buchanan St NW, Washington, DC 20011		
	Aggregate Year-To-date		\$ 100.00
94. Full Name, Mailing Address and Zip Code Margery E Goldberg 1429 Iris St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Zenith Gallery 1429 Iris St NW, Washington, DC 20012		
	Aggregate Year-To-date		\$ 350.00
95. Full Name, Mailing Address and Zip Code Alberto Gomez 7810 13th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Executive Name and Address of Employer Pierce Construction Co.Inc 1918 13th St SE, Washington, DC 20020		
	Aggregate Year-To-date		\$ 500.00
96. Full Name, Mailing Address and Zip Code Robert Goodrich 4800 17th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Director Name and Address of Employer Self 4301 Connecticut Ave NW, Washington, DC 20008		
	Aggregate Year-To-date		\$ 250.00
97. Full Name, Mailing Address and Zip Code Eric Goulet 5752 Sherier Pl NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Legislative Director Name and Address of Employer DC Council 1350 Pennsylvania Ave NW, Washington, DC 20004		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 54.00
98. Full Name, Mailing Address and Zip Code Linda L Gray 6430 Blair Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 104.00
99. Full Name, Mailing Address and Zip Code Karen Green 1924 Tulip St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 150.00
100. Full Name, Mailing Address and Zip Code Jackie Greenbaum 2723 Ontario Rd NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Restaurateur Name and Address of Employer Little Coco's 3907 14th St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 250.00
101. Full Name, Mailing Address and Zip Code Jeni Hansen 1425 17th St NW Apt 703, Washington, DC 20036	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer JH SP 1750 K St NW Ste 900, Washington, DC 20006			
		Aggregate Year-To-date		\$ 50.00
102. Full Name, Mailing Address and Zip Code Rebecca Harlan 616 Geranium St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 54.00
103. Full Name, Mailing Address and Zip Code Sydney Harley 2500 Sayles Pl SE Apt 10, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Communications Specialist Name and Address of Employer American Federation of Government Employees 80 F St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 84.00
104. Full Name, Mailing Address and Zip Code Cynthia Brooks Harris 3832 5th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 100.00
105. Full Name, Mailing Address and Zip Code Kathy Henderson 1807 L St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Realtor Name and Address of Employer Fairfax Realty 4400 MacArthur Blvd NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 50.00
106. Full Name, Mailing Address and Zip Code Stella Hodge 10806 Hollaway Dr, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 150.00
107. Full Name, Mailing Address and Zip Code Stella Hodge 10806 Hollaway Dr, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

	Aggregate Year-To-date			\$ 150.00
108. Full Name, Mailing Address and Zip Code Peggy Holly 1310 Roxanna Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
	Aggregate Year-To-date			\$ 25.00
109. Full Name, Mailing Address and Zip Code Yolanda Holmes 1781 Sycamore St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Doctor Name and Address of Employer Self 1781 Sycamore St NW, Washington, DC 20012			
	Aggregate Year-To-date			\$ 200.00
110. Full Name, Mailing Address and Zip Code Richard Holzsager 7106 Piney Branch Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 24.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 7106 Piney Branch Rd NW, Washington, DC 20012			
	Aggregate Year-To-date			\$ 24.00
111. Full Name, Mailing Address and Zip Code Catherine Hubbard 7706 13th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
	Aggregate Year-To-date			\$ 25.00
112. Full Name, Mailing Address and Zip Code Espanloa Hughes 12205 Pleasant Prospect Rd, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 200.00
113. Full Name, Mailing Address and Zip Code Carlos Iglesias 1357 Lawrence St NE, Washington, DC 20017		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Self Name and Address of Employer Real Estate 1357 Lawrence St NE, Washington, DC 20017		
		Aggregate Year-To-date		\$ 500.00
114. Full Name, Mailing Address and Zip Code Veronica Ingram 603 Farragut St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		
		Aggregate Year-To-date		\$ 104.00
115. Full Name, Mailing Address and Zip Code Mike Irving 1411 Longfellow st NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation General Manager Name and Address of Employer Steakhouse 101 Constitution Ave NW, Washington, DC 20001		
		Aggregate Year-To-date		\$ 50.00
116. Full Name, Mailing Address and Zip Code Alicia Jefferson 5724 Blair Rd NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual		Occupation Construction manager Name and Address of Employer Self 139 Kennedy St NW, Washington, DC 20011		
		Aggregate Year-To-date		\$ 54.00
117. Full Name, Mailing Address and Zip Code Willard Johnson 6128 New Hampshire Ave NE, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Name and Address of Employer Retired		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 25.00
118. Full Name, Mailing Address and Zip Code Frances Johnson 4805 Iowa Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 40.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 40.00
119. Full Name, Mailing Address and Zip Code Willie & Dee Jolley 5711 13th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 44.00	
Contributor Type Individual	Occupation President Name and Address of Employer Self 5711 13th St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 44.00
120. Full Name, Mailing Address and Zip Code Tommie Jones 3106 Apple Rd NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Govt Name and Address of Employer Dc govt 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 50.00
121. Full Name, Mailing Address and Zip Code Joan Jordan 5300 8th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 5.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 5.00
122. Full Name, Mailing Address and Zip Code Donnell Kearney 2018 Monroe st NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 254.00	
Contributor Type Individual	Occupation Realtor Name and Address of Employer Compass 2018 Monroe st NE, Washington, DC 20018			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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		Aggregate Year-To-date		\$ 254.00
123. Full Name, Mailing Address and Zip Code Lindy Kearns 6125 29th St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00	
Contributor Type Individual	Occupation teacher Name and Address of Employer American U 4801 Massachusetts Ave NW, Washington, DC 20016			
		Aggregate Year-To-date		\$ 75.00
124. Full Name, Mailing Address and Zip Code Bobby Ray Kidd 7402 Garland Ave, Takoma Park, MD 20912	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Program Analyst Name and Address of Employer Frederick County Government 12 E Church St, Frederick, MD 21701			
		Aggregate Year-To-date		\$ 25.00
125. Full Name, Mailing Address and Zip Code Gwendolyn King 1506 Hamilton St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1506 Hamilton St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 250.00
126. Full Name, Mailing Address and Zip Code Peter Kissel 5604 Utah Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5604 Utah Ave NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 300.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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127. Full Name, Mailing Address and Zip Code George Koch 1438 Montague St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1438 Montague St NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 404.00
128. Full Name, Mailing Address and Zip Code Carrie Kohns 7737 16th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 7737 16th St NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 254.00
129. Full Name, Mailing Address and Zip Code Tiffany Lancaster 2112 E Marshall Pl # 12, Hyattsville, MD 20785	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Political PR Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 54.00
130. Full Name, Mailing Address and Zip Code Etan Landis 4725 Colorado Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Architect Name and Address of Employer Landis architect builders 7059 Blair Rd NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 154.00
131. Full Name, Mailing Address and Zip Code Mark Lerner 2000 Tower Oaks Blvd, Rockville, MD 20852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 3030 K St NW, Washington, DC 20007		
Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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132. Full Name, Mailing Address and Zip Code Theodore Lerner 2000 Tower Oaks Blvd, Rockville, MD 20852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd, Rockville, MD 20852		
Aggregate Year-To-date		\$ 500.00	
133. Full Name, Mailing Address and Zip Code Curtis Lewis 1301 Juniper St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Staffer Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 250.00	
134. Full Name, Mailing Address and Zip Code Robert Lonon 612 Tewkesbury Pl NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 50.00	
135. Full Name, Mailing Address and Zip Code everett lott 3053 Chestnut St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Government Name and Address of Employer DC Gov 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 75.00	
136. Full Name, Mailing Address and Zip Code Gladys W Mack 7030 Oregon Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 300.00	

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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137. Full Name, Mailing Address and Zip Code Jennie Malloy 7040 31st St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Transcriptionist Name and Address of Employer Self 7040 31st St NW, Washington, DC 20015		
Aggregate Year-To-date			\$ 150.00
138. Full Name, Mailing Address and Zip Code Theresa Manning 1461 Holly St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
139. Full Name, Mailing Address and Zip Code Paula Marshall 2758 Unicorn Ln NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
140. Full Name, Mailing Address and Zip Code Lawrence Martin 301 Quackenbos St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
141. Full Name, Mailing Address and Zip Code James McAdams 1332 Sheridan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 200.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

142. Full Name, Mailing Address and Zip Code Kenyan R. McDuffie 2609 N Capitol St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Member Name and Address of Employer DC Council 1350 Pennsylvania Ave NW, Washington, DC 20004		
Aggregate Year-To-date		\$ 51.00	
143. Full Name, Mailing Address and Zip Code Patrick McGlone 5715 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 254.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Ullico Inc 1625 I St NW, Washington, DC 20006		
Aggregate Year-To-date		\$ 254.00	
144. Full Name, Mailing Address and Zip Code Pamela L McKee 431 Oneida Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 300.00	
145. Full Name, Mailing Address and Zip Code Susan Saunders McKenzie 4621 Blagden Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 51.00
Contributor Type Individual	Occupation Name and Address of Employer Self 4621 Blagden Ave NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 301.00	
146. Full Name, Mailing Address and Zip Code Michael B Jackson McKenzie 4621 Blagden Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Director Name and Address of Employer Grain Management 1900 K St NW, Washington, DC 20006		
Aggregate Year-To-date		\$ 354.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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147. Full Name, Mailing Address and Zip Code Rielle Miller-Gabriel 6225 29th st NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Ethics Officer Name and Address of Employer Freddie Mac 8200 Jones Branch Dr, Mc Lean, VA 22102		
Aggregate Year-To-date		\$ 250.00	
148. Full Name, Mailing Address and Zip Code Lena Moffitt 1630 R St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Director Name and Address of Employer Sierra Club 50 R St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 200.00	
149. Full Name, Mailing Address and Zip Code Mary Monroe 327 Rittenhouse St NW, WASHINGTON, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 100.00	
150. Full Name, Mailing Address and Zip Code Pia Moore 12603 Woodmore North Blvd, Bowie, MD 20720	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Progam Analyst Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 500.00	
151. Full Name, Mailing Address and Zip Code Selerya Moore 215 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Professor Name and Address of Employer Trinity Washington University 125 Michigan Ave NE, Washington, DC 20017		
Aggregate Year-To-date		\$ 105.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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152. Full Name, Mailing Address and Zip Code William & Phyllis Morris 1705 Verbena St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 300.00
153. Full Name, Mailing Address and Zip Code Cleveland Mosby 6500 16th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 500.00
154. Full Name, Mailing Address and Zip Code Rita Murray 522 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 24.00
Contributor Type Individual	Occupation Processor Name and Address of Employer Allied Title and Escrow 3100 Clarendon Blvd, Arlington, VA 22201		
Aggregate Year-To-date			\$ 24.00
155. Full Name, Mailing Address and Zip Code Rita Murray 522 Ingraham St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 50.00
156. Full Name, Mailing Address and Zip Code Vanessa Murray 1560 Hemlock St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Public Affairs Name and Address of Employer SpecPro Mgmt Svs 1826 N Loop 1604 W, San Antonio, TX 78248		
Aggregate Year-To-date			\$ 350.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

157. Full Name, Mailing Address and Zip Code Vanessa Murray 1560 Hemlock St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Public Affairs Name and Address of Employer SpecPro Mgmt Svs 1826 N Loop 1604 W, San Antonio, TX 78248		
Aggregate Year-To-date			\$ 350.00
158. Full Name, Mailing Address and Zip Code Steven & Stephanie Nash 5722 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation President Name and Address of Employer Stoddard Baptist Home Foundation Inc 1818 Newton St NW, Washington, DC 20010		
Aggregate Year-To-date			\$ 100.00
159. Full Name, Mailing Address and Zip Code Theodore Ngatchou 6323 Georgia Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Agency Administrator Name and Address of Employer Galaxy Healthcare Solutions 240 Quackenbos St NE, Washington, DC 20011		
Aggregate Year-To-date			\$ 300.00
160. Full Name, Mailing Address and Zip Code Theodore Ngatchou 240 Quackenbos St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 240 Quackenbos St NE, Washington, DC 20011		
Aggregate Year-To-date			\$ 100.00
161. Full Name, Mailing Address and Zip Code Lavenda Orr 5804 8th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Doctor Name and Address of Employer Amerihealth Cartias DC 1250 Maryland Ave SW, Washington, DC 20024		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

162. Full Name, Mailing Address and Zip Code Latrena Owens 2857 31st Pl NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Executive Director Name and Address of Employer DC Govt 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 100.00
163. Full Name, Mailing Address and Zip Code Derek Parker 6101 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Training mgr Name and Address of Employer Self 6101 16th St NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 54.00
164. Full Name, Mailing Address and Zip Code Lori Parker 2647 15th St NW, Washington, DC 20009	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Self 1101 Connecticut Ave NW, Washington, DC 20036		
Aggregate Year-To-date			\$ 25.00
165. Full Name, Mailing Address and Zip Code Marie B Jackson Peoples 1429 Geranium St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 200.00
166. Full Name, Mailing Address and Zip Code Steven Price 437 Cedar St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Dentist Name and Address of Employer Self 437 Cedar St NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 254.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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167. Full Name, Mailing Address and Zip Code Kris Randolph 1346 Sheridan St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation team lead Name and Address of Employer DC PSC 1325 G St NW, Washington, DC 20005		
Aggregate Year-To-date			\$ 54.00
168. Full Name, Mailing Address and Zip Code Jermaine Reed 2101 Vine St, Kansas City, MO 64108	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 2101 Vine St, Kansas City, MO 64108		
Aggregate Year-To-date			\$ 100.00
169. Full Name, Mailing Address and Zip Code Anthony Richards 6413 9th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation contractor Name and Address of Employer Executive Contractors LLC 6413 9th St NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 100.00
170. Full Name, Mailing Address and Zip Code R Lucia Riddle 1099 22nd St NW, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 104.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 354.00
171. Full Name, Mailing Address and Zip Code Brandy Rodgers 6216 Parallel Ln, COLUMBIA, MD 21045	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Construction Manager Name and Address of Employer MGAC 730 11th st NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 154.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

172. Full Name, Mailing Address and Zip Code Cinthia Ruiz 620 Whispering Wind CT, Gaithersburg, MD 20877	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Director Name and Address of Employer DC Govt 1200 1st St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 50.00
173. Full Name, Mailing Address and Zip Code Brandon Rule 55 M St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Developer Name and Address of Employer Rule Enterprises 55 M St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 154.00
174. Full Name, Mailing Address and Zip Code McKinley Rush 5517 13th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 54.00
175. Full Name, Mailing Address and Zip Code Earline Sampson 604 Underwood St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 75.00
176. Full Name, Mailing Address and Zip Code David Samuel 631 Sheridan St, Hyattsville, MD 20783	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Doctor Name and Address of Employer Self 631 Sheridan St, Hyattsville, MD 20783		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

177. Full Name, Mailing Address and Zip Code Roger Sanchez 5661 3rd St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Employed Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 20.00
178. Full Name, Mailing Address and Zip Code Loughton Sargeant 3803 Clairton Dr, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
179. Full Name, Mailing Address and Zip Code Patricia Scott 713 Fern Pl NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 24.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 24.00
180. Full Name, Mailing Address and Zip Code Johnnie Scott-Rice 4262 Massachusetts Ave SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
181. Full Name, Mailing Address and Zip Code Malaika Scriven 10903 Flying Change Ct, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Planner Name and Address of Employer Dc gov 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 150.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

182. Full Name, Mailing Address and Zip Code Angela Simmons 207 33rd St NE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00
183. Full Name, Mailing Address and Zip Code Nathaniel Sims 1912 Spruce Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 200.00
184. Full Name, Mailing Address and Zip Code James Slattery 7035 Blair Rd NW Apt 427, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Correspondence officer Name and Address of Employer District government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 50.00
185. Full Name, Mailing Address and Zip Code Rhoda McLeese Smith 5167 7th St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 25.00
186. Full Name, Mailing Address and Zip Code Michael Smith 4838 7th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

187. Full Name, Mailing Address and Zip Code John Stokes 1519 Varnum st NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Assoc dir Name and Address of Employer DGS 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 54.00
188. Full Name, Mailing Address and Zip Code William Sudow 1123 Crest Ln, McLean, VA 22101	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Chief Administrative Officer Name and Address of Employer Madiosn Marquette 1000 Maine Ave SW, Washington, DC 20024		
Aggregate Year-To-date			\$ 1,000.00
189. Full Name, Mailing Address and Zip Code Sylvia Sxphax 609 60th Pl, Fairmount Heights, MD 20743	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 609 60th Pl, Fairmount Heights, MD 20743		
Aggregate Year-To-date			\$ 54.00
190. Full Name, Mailing Address and Zip Code Andrea Syphac 215 13th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Self Name and Address of Employer Self employed 215 13th St SE, Washington, DC 20003		
Aggregate Year-To-date			\$ 54.00
191. Full Name, Mailing Address and Zip Code John Syphax 907 M St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 101.00
Contributor Type Individual	Occupation Doctor Name and Address of Employer Self 907 M St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 101.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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192. Full Name, Mailing Address and Zip Code Robert Tanenbaum 2000 Tower Oaks Blvd, Rockville, MD 20852	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Principal Name and Address of Employer Lerner Enterprises 2000 Tower Oaks Blvd, Rockville, MD 20852		
Aggregate Year-To-date		\$ 500.00	
193. Full Name, Mailing Address and Zip Code Joan Thomas 715 Varnum St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 54.00	
194. Full Name, Mailing Address and Zip Code Dionne Thomas 116 Fort Dr NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 30.00
Contributor Type Individual	Occupation Clinical Operational Rep Name and Address of Employer Childrens National 2101 Martin Luther King Jr Ave SE, Washington, DC 20020		
Aggregate Year-To-date		\$ 30.00	
195. Full Name, Mailing Address and Zip Code Doreen Thonpson 1510 Emerson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		
Aggregate Year-To-date		\$ 200.00	
196. Full Name, Mailing Address and Zip Code Laurel Tucker 301 Madison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer Retired		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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		Aggregate Year-To-date		\$ 100.00
197. Full Name, Mailing Address and Zip Code Cerise Turner 223 Jefferson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Legal Name and Address of Employer Sullivan & Cromwell 1700 New York Ave NW, Washington, DC 20006			
		Aggregate Year-To-date		\$ 50.00
198. Full Name, Mailing Address and Zip Code Manuel Varela 3237 Arcadia Pl NW, Washington, DC 20015-2329	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Lewis Baach Kaufmann Middlemiss PLLC 3237 Arcadia Pl NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 500.00
199. Full Name, Mailing Address and Zip Code Kyle Von Stearns 538 Oneida Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 254.00	
Contributor Type Individual	Occupation Owner Name and Address of Employer HealPay 538 Oneida Pl NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 254.00
200. Full Name, Mailing Address and Zip Code Mary Wade 5752 2nd St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 60.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 5752 2nd St NE, Washington, DC 20011			
		Aggregate Year-To-date		\$ 110.00
201. Full Name, Mailing Address and Zip Code Annie Wallace 926 Hamilton St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 154.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 154.00
202. Full Name, Mailing Address and Zip Code Xzaquoinett Y Warrick 4812 7th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Director Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 179.00
203. Full Name, Mailing Address and Zip Code Linda Crichlow White 1625 Nicholson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 104.00
204. Full Name, Mailing Address and Zip Code Shaughn White 5514 13th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Individual	Occupation Self Name and Address of Employer Real Estate 5514 13th St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 150.00
205. Full Name, Mailing Address and Zip Code Karen Whiting-Diggs 6101 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			
		Aggregate Year-To-date		\$ 25.00
206. Full Name, Mailing Address and Zip Code Marian Williams 5722 3rd Pl NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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		Aggregate Year-To-date		\$ 25.00
207. Full Name, Mailing Address and Zip Code Joe Williams 1404 Post Ln, Bowie, MD 20716	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 20.00	
Contributor Type Individual	Occupation IT Name and Address of Employer DHS 111 Massachusetts Ave NW, Washington, DC 20529			
		Aggregate Year-To-date		\$ 20.00
208. Full Name, Mailing Address and Zip Code Donald Williams 314 Tamerack Ct, Upper marlboro, MD 20774	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Agent Name and Address of Employer Colonial Life 5850 Waterloo Rd, Columbia, MD 21045			
		Aggregate Year-To-date		\$ 54.00
209. Full Name, Mailing Address and Zip Code Beatrice Williams-Davis 3903 20th St NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Director Name and Address of Employer Davis Center 6218 3rd St NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 54.00
210. Full Name, Mailing Address and Zip Code Karen Williamson 1434 Whittier St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 1434 Whittier St NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 100.00
211. Full Name, Mailing Address and Zip Code Patricia Wilson 1412 Primrose Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Name and Address of Employer Retired			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 54.00
212. Full Name, Mailing Address and Zip Code Conrad Woody 5028 A St SE, Washington, DC 20019		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual		Occupation Partner		
		Name and Address of Employer Odgers Berndtson 5028 A St SE, Washington, DC 20019		
		Aggregate Year-To-date		\$ 200.00
213. Full Name, Mailing Address and Zip Code S & S Wine and Spirits 6925 4th St NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 500.00
Contributor Type Business		Occupation		
Business Type Corporation		Name and Address of Employer		
		Aggregate Year-To-date		\$ 500.00
214. Full Name, Mailing Address and Zip Code Anthem Inc 3075 Vandercar Way, Cincinnati, OH 45209		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 500.00
Contributor Type Business		Occupation		
Business Type Corporation		Name and Address of Employer		
		Aggregate Year-To-date		\$ 500.00
215. Full Name, Mailing Address and Zip Code Committee to Expand the Middle Class 888 Brannan St, San Francisco, CA 94103		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 500.00
Contributor Type Business		Occupation		
Business Type Limited Liability Company		Name and Address of Employer		
		Aggregate Year-To-date		\$ 500.00
216. Full Name, Mailing Address and Zip Code FSQBC LLC 6605 31st St NW, Washington, DC 20015		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/08/2020 Amount of Each Receipt This Period \$ 25.00
Contributor Type Business		Occupation		
Business Type Limited Liability Company		Name and Address of Employer		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 25.00
217. Full Name, Mailing Address and Zip Code Tabard Properties LLC 1739 N St NW, Washington, DC 20036	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 150.00
218. Full Name, Mailing Address and Zip Code CAT Consulting Service LLC 537 Randolph St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 150.00
219. Full Name, Mailing Address and Zip Code Cecil Lockhart Insurance Services 3907 Georgia Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 100.00
220. Full Name, Mailing Address and Zip Code LAX Wines & Spirits 3035 Naylor Rd SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/08/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 500.00
221. Full Name, Mailing Address and Zip Code Wilhelm Bonnette 3516 Silver Park Dr, Suitland, MD 20746	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 254.00	
Contributor Type Individual	Occupation Manager Name and Address of Employer Prestige Health 143 Kennedy St NW, Washington, DC 20011			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 254.00
222. Full Name, Mailing Address and Zip Code Sarah Comiskey 3387 Stephenson PI NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Self Name and Address of Employer Self 3387 Stephenson PI NW, Washington, DC 20015			
		Aggregate Year-To-date		\$ 25.00
223. Full Name, Mailing Address and Zip Code Noble Davis 3832 5th st NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Realtor Name and Address of Employer Self 3832 5th st NW, Washington, DC 20011			
		Aggregate Year-To-date		\$ 100.00
224. Full Name, Mailing Address and Zip Code Janice Davis 1420 Primrose Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Principal Name and Address of Employer Davis Planning 7059 Blair Rd NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 50.00
225. Full Name, Mailing Address and Zip Code David Donaldson 2939 Van Ness St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 24.00	
Contributor Type Individual	Occupation Self Name and Address of Employer Self 2939 Van Ness St NW, Washington, DC 20008			
		Aggregate Year-To-date		\$ 24.00
226. Full Name, Mailing Address and Zip Code Patricia C Elwood 2740 34th St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Director Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 200.00
227. Full Name, Mailing Address and Zip Code Harrine Freeman 606 Nicholson St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/09/2020 Amount of Each Receipt This Period \$ 254.00
Contributor Type Individual		Occupation Test Engineer Name and Address of Employer Innova Systems 2385 Northside Dr, San Diego, CA 92108		
		Aggregate Year-To-date		\$ 254.00
228. Full Name, Mailing Address and Zip Code DeGeorge Griffin 4849 Connecticut Ave NW apt 509, Washington, DC 20008		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/09/2020 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Senior manager Name and Address of Employer Fiscal Note 1201 Pennsylvania Ave Nw, Washington, DC 20004		
		Aggregate Year-To-date		\$ 150.00
229. Full Name, Mailing Address and Zip Code Levadie Hamlett 323 W St NE, Washington, DC 20002		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/09/2020 Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual		Occupation Self Name and Address of Employer Self 1234 Massachusetts Ave NW, Washington, DC 20005		
		Aggregate Year-To-date		\$ 20.00
230. Full Name, Mailing Address and Zip Code Tori Hawkins-Plummer 2519 High St SE, Washington, DC 20020		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 03/09/2020 Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual		Occupation Analyst Name and Address of Employer BET Networks 1235 W St NE, Washington, DC 20018		
		Aggregate Year-To-date		\$ 154.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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231. Full Name, Mailing Address and Zip Code Mike Hayes 1405 Kings Valley Dr, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Self Name and Address of Employer Software 1405 Kings Valley Dr, Bowie, MD 20721		
Aggregate Year-To-date		\$ 20.00	
232. Full Name, Mailing Address and Zip Code Ayanna Hudson 7258 15th Pl NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Director Name and Address of Employer National Endowment for the Arts 400 7th St SW, Washington, DC 20506		
Aggregate Year-To-date		\$ 304.00	
233. Full Name, Mailing Address and Zip Code Branden Issac 1212 4th St SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Employee Name and Address of Employer Civitas 1805 7th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 200.00	
234. Full Name, Mailing Address and Zip Code Ann Jackson 1250 S Washington St, Alexandria, VA 22314	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 1250 S Washington St, Alexandria, VA 22314		
Aggregate Year-To-date		\$ 154.00	
235. Full Name, Mailing Address and Zip Code Kevin Jenkins 7422 9th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Staffer Name and Address of Employer Federal Government 825 N Capitol St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 154.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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236. Full Name, Mailing Address and Zip Code Fred Jones 1612 Allison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Federal Government Name and Address of Employer Federal Government 825 N Capitol St NE, Washington, DC 20002		
Aggregate Year-To-date			\$ 100.00
237. Full Name, Mailing Address and Zip Code Ganesha Martin 11010 Bradbury Manor Ct, Silver Spring, MD 20901	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 154.00
Contributor Type Individual	Occupation Self Name and Address of Employer Lawyer 11010 Bradbury Manor Ct, Silver Spring, MD 20901		
Aggregate Year-To-date			\$ 154.00
238. Full Name, Mailing Address and Zip Code Shilpa Nadhan 4015 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Marriott Name and Address of Employer Manager 4015 16th St NW, Washington, DC 20011		
Aggregate Year-To-date			\$ 25.00
239. Full Name, Mailing Address and Zip Code Cynthia Prather 7832 12th St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Staffer Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 75.00
240. Full Name, Mailing Address and Zip Code Gregory Proctor 11402 Rhodenda Ave, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation lobbyist Name and Address of Employer G S Proctor and Assoc 14408 Old Mill Rd, Upper Marlboro, MD 20772		
Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

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241. Full Name, Mailing Address and Zip Code Dianne Proctor 11402 Rhodenda Ave, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation CFO Name and Address of Employer G S Proctor and Assoc 14408 Old Mill Rd, Upper Marlboro, MD 20772		
Aggregate Year-To-date		\$ 500.00	
242. Full Name, Mailing Address and Zip Code Jesse Raben 1627 Nicholson St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Self Name and Address of Employer Lawyer 1627 Nicholson St NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 54.00	
243. Full Name, Mailing Address and Zip Code Paula Sanderlin-Dorosti 1371 Locust Rd NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Real estate broker Name and Address of Employer Self 1371 Locust Rd NW, Washington, DC 20012		
Aggregate Year-To-date		\$ 150.00	
244. Full Name, Mailing Address and Zip Code Wayne Settles 5715 6th St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer Teamster 639 3130 Ames Pl NE, Washington, DC 20018		
Aggregate Year-To-date		\$ 100.00	
245. Full Name, Mailing Address and Zip Code Stacye Stewart 4001 Benning Rd NE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation FUNERAL DIRECTOR Name and Address of Employer STEWART FUNERAL HOME 4001 Benning Rd NE, Washington, DC 20019		
Aggregate Year-To-date		\$ 250.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

246. Full Name, Mailing Address and Zip Code Jana Taylor 4910 Green Creek Ter, Glenn Dale, MD 20769	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Global Employment Lawyer Name and Address of Employer Tenable Inc 70216 Columbia gateway drive, Columbia, MD 20146		
Aggregate Year-To-date		\$ 100.00	
247. Full Name, Mailing Address and Zip Code Alice Thompson 2316 1st St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 54.00
Contributor Type Individual	Occupation Team Lead Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 204.00	
248. Full Name, Mailing Address and Zip Code Chris Toussaint 537 Randolph St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Self Name and Address of Employer Manager 537 Randolph St NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 50.00	
249. Full Name, Mailing Address and Zip Code Douglas Tucker 301 Madison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Principal Name and Address of Employer DCS Design 8614 Westwood Center Dr, Tysons, VA 22182		
Aggregate Year-To-date		\$ 50.00	
250. Full Name, Mailing Address and Zip Code Mark Vinson 516 Randolph St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Self Name and Address of Employer Lawyer 516 Randolph St NW, Washington, DC 20011		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

		Aggregate Year-To-date		\$ 50.00
251. Full Name, Mailing Address and Zip Code Eva Washington 7546 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Nurse Name and Address of Employer National Nurses Inc 8630 Fenton St, Silver Spring, MD 20910			
		Aggregate Year-To-date		\$ 50.00
252. Full Name, Mailing Address and Zip Code Adam Weers 3260 Banneker Dr NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Real Estate Developer Name and Address of Employer Trammell Crow Company 1055 Thomas Jefferson St NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 500.00
253. Full Name, Mailing Address and Zip Code Zillah J Wesley 5028 Illinois Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Clinical social worker Name and Address of Employer DC Government 441 4th St NW, Washington, DC 20001			
		Aggregate Year-To-date		\$ 129.00
254. Full Name, Mailing Address and Zip Code BJ Williams 2400 Beacon St, Chestnut Hill, MA 02467	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/09/2020	Amount of Each Receipt This Period \$ 54.00	
Contributor Type Individual	Occupation Entrepreneur Name and Address of Employer Self 1801 Crystal Dr, Arlington, VA 22202			
		Aggregate Year-To-date		\$ 54.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

255. Full Name, Mailing Address and Zip Code Jeffrey Tignor 25 Longfellow St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/10/2020	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation lawyer		
	Name and Address of Employer Federal Communications Commission 445 12th St SW, Washington, DC 20554		
Aggregate Year-To-date			\$ 50.00
256. Full Name, Mailing Address and Zip Code 2GIP LLC 1515 Lawrence St NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/10/2020	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business	Occupation		
Business Type Limited Liability Company	Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 31,435.00

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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Re-Elect Brandon Todd 2020

1. Full Name, Mailing Address and Zip Code Bradford Real Estate, LLC 4800 Georgia Ave NW, Washington, DC 20011	Purpose of Expenditure Rental	Date (month, day, year) 02/01/2020	Amount of Each Expenditure This Period \$ 2,150.00
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 02/02/2020	Amount of Each Expenditure This Period \$ 299.50
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code NGPVAN 1445 New York NW Suite 200, Washington, DC 20005	Purpose of Expenditure Consultant	Date (month, day, year) 02/02/2020	Amount of Each Expenditure This Period \$ 1,500.00
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Metro Women's Club 1526 New Hampshire Avenue, NW, Washington, DC 20036	Purpose of Expenditure Advertising	Date (month, day, year) 02/04/2020	Amount of Each Expenditure This Period \$ 1,100.00
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code Jackson Carnes 1101 Fern Street NW, Washington, DC 20012	Purpose of Expenditure Consultant	Date (month, day, year) 02/04/2020	Amount of Each Expenditure This Period \$ 3,150.00
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 02/09/2020	Amount of Each Expenditure This Period \$ 44.27
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Marcelo Madrano 4300 Georgia Avenue NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/10/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Micah Lee 319 Allison Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/10/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code Edwin Maximay 5101 5th Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/10/2020	Amount of Each Expenditure This Period \$ 255.00
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code ORlando Rickman 1301 Missouri Avenue NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/10/2020	Amount of Each Expenditure This Period \$ 120.00
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 02/16/2020	Amount of Each Expenditure This Period \$ 25.51
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code Micah Lee 319 Allison Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code ORlando Rickman 1301 Missouri Avenue NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 150.00
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Quintin Carr 1330 Locust Road NW, Washington, DC 20012	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code Edwin Maximay 5101 5th Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 450.00
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code Gelberg Signs 6511 Chillum Place, NW, Washington, DC 20011	Purpose of Expenditure Advertising	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 2,954.97
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code Jackson Carnes 1101 Fern Street NW, Washington, DC 20012	Purpose of Expenditure Consultant	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 3,150.00
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code Marcelo Madrano 4300 Georgia Avenue NW, Washington, DC 20011	Purpose of Expenditure Consultant	Date (month, day, year) 02/18/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 53.36
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code Edwin Maximay 5101 5th Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		
21. Full Name, Mailing Address and Zip Code ORlando Rickman 1301 Missouri Avenue NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 45.00
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code Quintin Carr 1330 Locust Road NW, Washington, DC 20012	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 45.00
Occupation	Name and Address of Employer		
23. Full Name, Mailing Address and Zip Code American Express 200 Vesey Street, New York, NY 10285	Purpose of Expenditure Supplies	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 1,616.86
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code Helper Bell, LLC 1101 Connecticut Avenue, NW, Washington, DC 20036	Purpose of Expenditure Consultant	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 3,528.26
Occupation	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code CreateDC, LLC 4750-A Clifton Road, Temple Hills, MD 20748	Purpose of Expenditure Advertising	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 1,375.00
Occupation	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code Bradford Real Estate, LLC 4800 Georgia Ave NW, Washington, DC 20011	Purpose of Expenditure Rental	Date (month, day, year) 02/23/2020	Amount of Each Expenditure This Period \$ 2,150.00
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code AAA Party Rental 3361 75th Avenue, Landover, MD 20785	Purpose of Expenditure Fund-raiser	Date (month, day, year) 02/29/2020	Amount of Each Expenditure This Period \$ 5,165.23
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/01/2020	Amount of Each Expenditure This Period \$ 11.86
Occupation	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code Edwin Maximay 5101 5th Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/02/2020	Amount of Each Expenditure This Period \$ 420.00
Occupation	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code American Express 200 Vesey Street, New York, NY 10285	Purpose of Expenditure Supplies	Date (month, day, year) 03/02/2020	Amount of Each Expenditure This Period \$ 1,263.83
Occupation	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code Jackson Carnes 1101 Fern Street, NW, Washington, DC 20011	Purpose of Expenditure Consultant	Date (month, day, year) 03/02/2020	Amount of Each Expenditure This Period \$ 3,150.00
Occupation	Name and Address of Employer		

32. Full Name, Mailing Address and Zip Code American Express 200 Vesey Street, New York, NY 10285	Purpose of Expenditure Campaign Materials	Date (month, day, year) 03/02/2020	Amount of Each Expenditure This Period \$ 1,263.83
Occupation	Name and Address of Employer		
33. Full Name, Mailing Address and Zip Code SHarolyn Mack 510 Riggs Road NE, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 600.00
Occupation	Name and Address of Employer		
34. Full Name, Mailing Address and Zip Code ORlando Rickman 1301 Missouri Avenue NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		
35. Full Name, Mailing Address and Zip Code Maverick Strategies and Mail, LLC 3723 North Vernon Street, Arlington, VA 22207	Purpose of Expenditure Advertising	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 8,075.09
Occupation	Name and Address of Employer		
36. Full Name, Mailing Address and Zip Code Wilka Stephens 2739 4th Street NE, Washington, DC 20002	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 60.00
Occupation	Name and Address of Employer		
37. Full Name, Mailing Address and Zip Code Sugar Bar Rim 12900 Asbury Drive, Fort Washington, MD 20744	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 1,295.00
Occupation	Name and Address of Employer		
38. Full Name, Mailing Address and Zip Code SHarolyn Mack 510 Riggs Road NE, Washington, DC 20011	Purpose of Expenditure Supplies	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 25.12
Occupation	Name and Address of Employer		
39. Full Name, Mailing Address and Zip Code SHarolyn Mack 510 Riggs Road NE, Washington, DC 20011	Purpose of Expenditure Supplies	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 12.59
Occupation	Name and Address of Employer		

40. Full Name, Mailing Address and Zip Code Sugar Bar Rim 12900 Asbury Drive, Fort Washington, MD 20744	Purpose of Expenditure Fund-raiser	Date (month, day, year) 03/03/2020	Amount of Each Expenditure This Period \$ 1,295.00
Occupation	Name and Address of Employer		
41. Full Name, Mailing Address and Zip Code AAA Party Rental 3361 75th Avenue, Landover, MD 20785	Purpose of Expenditure Fund-raiser	Date (month, day, year) 03/07/2020	Amount of Each Expenditure This Period \$ 625.05
Occupation	Name and Address of Employer		
42. Full Name, Mailing Address and Zip Code Gotta Go Now! LLC 1425 Bangor Street, SE, Washington, DC 20020	Purpose of Expenditure Fund-raiser	Date (month, day, year) 03/07/2020	Amount of Each Expenditure This Period \$ 437.65
Occupation	Name and Address of Employer		
43. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 358.47
Occupation	Name and Address of Employer		
44. Full Name, Mailing Address and Zip Code Donovan Mahoney 10006 Bald Hill Road, Bowie, MD 20721	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 361.00
Occupation	Name and Address of Employer		
45. Full Name, Mailing Address and Zip Code Sherleta Settles 1675 Myrtle Street NW, Washington, DC 20012	Purpose of Expenditure Fund-raiser	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 900.00
Occupation	Name and Address of Employer		
46. Full Name, Mailing Address and Zip Code Edwin Maximav 5101 5th Street NW, Washington, DC 20011	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 360.00
Occupation	Name and Address of Employer		
47. Full Name, Mailing Address and Zip Code Wilka S Stephens 2739 4th Street NE, Washington, DC 20002	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 180.00
Occupation	Name and Address of Employer		

48. Full Name, Mailing Address and Zip Code Stephen Paesaud 8259 Quillpoint Drive, Bowie, MD 20720	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 361.00
Occupation	Name and Address of Employer		
49. Full Name, Mailing Address and Zip Code Cheri & Kwee Catering PO Box 6621 , Upper Marlboro, MD 20791	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 2,600.00
Occupation	Name and Address of Employer		
50. Full Name, Mailing Address and Zip Code Clay Street Marketing LLC 4503 Brooks Street, NE, Washington, DC 20019	Purpose of Expenditure Consultant	Date (month, day, year) 03/08/2020	Amount of Each Expenditure This Period \$ 3,000.00
Occupation	Name and Address of Employer		
51. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, ME 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/10/2020	Amount of Each Expenditure This Period \$ 113.23
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 56,876.68

